Case 19-32152-ABA Doc 10 Filed 12/12/19 Entered 12/12/19 11:09:41 Desc Main Document Page 1 of 48

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|---------------------|-----------|--------------------|
| Debtor 1 | Anthony J Bersit | 0 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Josephine A. Ber | sito | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JER | SEY | |
| Case number | 19-32152 | | | |
| (if known) | | | | Check if this is a |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | | assets of what you own |
|-----|--|-------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 196,185.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,252.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 201,437.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 145,996.11 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 22,382.00 |
| | Your total liabilities | \$ | 168,378.11 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,213.91 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,662.22 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other so | hedules. |
| | ■ Yes | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| Debtor 1 | Anthony J Bersito | - |
|----------|----------------------|---------------------------------|
| Debtor 2 | Josephine A. Bersito | Case number (if known) 19-32152 |

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | ıl claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | שטט | cument Page 3 of 48 | | | |
|---|--|-----------------------|---|---------------------------------|--|---|
| Fill in this info | rmation to identify your ca | ase and this filing | g: | | | |
| Debtor 1 | Anthony J Bersito First Name | Middle Name | Last Name | | | |
| Debtor 2 | Josephine A. Bers | | L AN | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: _[| DISTRICT OF NEV | W JERSEY | | | |
| Case number | 19-32152 | | | | | Check if this is ar amended filing |
| | orm 106A/B le A/B: Prope | erty | | | | 12/15 |
| | re space is needed, attach a | | married people are filing together, both a his form. On the top of any additional pag | | | |
| Do you own or □ No. Go to Pa | have any legal or equitable i | <u> </u> | I Estate You Own or Have an Interest In dence, building, land, or similar property? | | | |
| I. Do you own or | have any legal or equitable i | interest in any resid | | | | |
| . Do you own or No. Go to Pa Yes. Where | have any legal or equitable i | interest in any resid | t is the property? Check all that apply Single-family home Duplex or multi-unit building | the amount | of any secured o | ns or exemptions. Put claims on Schedule D: Secured by Property. |
| . Do you own or No. Go to Pa Yes. Where | have any legal or equitable in art 2. is the property? ding Way Road s, if available, or other description | interest in any resid | t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Current valuentire prope | of any secured of the Have Claims ue of the | claims on Schedule D: Secured by Property. Current value of the portion you own? |
| No. Go to Pa Yes. Where 1.1 209 Winc Street address | have any legal or equitable in art 2. is the property? ding Way Road s, if available, or other description | What | t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one | Current valuentire proper \$190 | of any secured of the Have Claims ue of the erty? 6,185.00 ne nature of you e simple, tenan. | claims on Schedule D: Secured by Property. |

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 19-32152-ABA Doc 10 Filed 12/12/19 Entered 12/12/19 11:09:41 Document Page 4 of 48 Debtor 1 Anthony J Bersito 19-32152 Debtor 2 Josephine A. Bersito Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Chevy 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Malibu Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2018 Year: Debtor 2 only Current value of the Current value of the 130.000 ■ Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? Other information: ☐ At least one of the debtors and another **Location: 209 Winding Way** \$5,252.00 \$5.252.00 Road, Stratford NJ 08084 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,252.00 pages you have attached for Part 2. Write that number here......=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ Yes. Describe..... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No

Official Form 106A/B Schedule A/B: Property page 2

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ Yes. Describe.....

No

Filed 12/12/19 Entered 12/12/19 11:09:41 Case 19-32152-ABA Doc 10 Document Page 5 of 48 Debtor 1 Anthony J Bersito 19-32152 Debtor 2 Josephine A. Bersito Case number (if known) ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$0.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... TD Bank - 3689 \$0.00 Savings 17.1. TD Bank - 2267 \$0.00 17.2. checking **TD Bank - 1219** \$0.00 17.3. checking **TD Bank - 1485** \$0.00 savings 17.4. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

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| | ebtor 1 ebtor 2 | Anthony J Be Josephine A. | | | Case number (if known) | 19-32152 |
|-----|--------------------------|--|--|---|--------------------------------------|---|
| 20. | Negoti Non-ne ■ No | able instruments i egotiable instrume | nclude personal checks, ents are those you cannot | egotiable and non-negotiable ins cashiers' checks, promissory notes transfer to someone by signing or | s, and money orders. | |
| | ⊔ Yes. | Give specific infor | mation about them Issuer name: | | | |
| 21. | | nent or pension a bles: Interests in IF | |), 403(b), thrift savings accounts, c | or other pension or profit-sharing p | blans |
| | Yes. | List each account | separately. Type of account: | Institution name: | | |
| | | | Pension | VA | | \$0.00 |
| | | | Pension | <u>Virtua</u> | | \$0.00 |
| 22. | Your s | | deposits you have made | e so that you may continue service nt, public utilities (electric, gas, wat | | ies, or others |
| | | | | Institution name or indivi | dual: | |
| 23. | | ies (A contract for | a periodic payment of mo | oney to you, either for life or for a r | number of years) | |
| | ■ No □ Yes | lss | uer name and description | 1. | | |
| 24. | 26 U.S.0 | | n IRA, in an account in a 29A(b), and 529(b)(1). | a qualified ABLE program, or un | der a qualified state tuition pro | gram. |
| | ■ No □ Yes | Ins | titution name and descrip | tion. Separately file the records of | any interests.11 U.S.C. § 521(c): | |
| 25. | _ | equitable or fut | ure interests in property | (other than anything listed in li | ne 1), and rights or powers exe | rcisable for your benefit |
| | ■ No □ Yes. | Give specific info | rmation about them | | | |
| 26. | | | | , and other intellectual property ceeds from royalties and licensing | agreements | |
| | | Give specific info | rmation about them | | | |
| 27. | | | nd other general intanginits, exclusive licenses, co | ibles ooperative association holdings, lic | quor licenses, professional license | es |
| | | Give specific info | rmation about them | | | |
| M | oney or _l | property owed to | you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | _ | unds owed to yo | u | | | |
| | ■ No □ Yes. | Give specific infor | mation about them, include | ding whether you already filed the | returns and the tax years | |
| 29. | | support oles: Past due or lu | ump sum alimony, spousa | al support, child support, maintena | nce, divorce settlement, property | settlement |

☐ Yes. Give specific information.....

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| | btor 1 btor 2 | Anthony J Bersito Josephine A. Bersito | Case number (if known) | 19-32152 |
|-----|------------------|---|---|----------------------------|
| | Examp _ | amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits, sick po benefits; unpaid loans you made to someone else | ay, vacation pay, workers' compe | nsation, Social Security |
| | ■ No □ Yes. | Give specific information | | |
| | | sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credi | t, homeowner's, or renter's insurar | nce |
| | _ | Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| 32. | If you a | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poone has died. | licy, or are currently entitled to rece | eive property because |
| | □ Yes. | Give specific information | | |
| | Examp ■ No | s against third parties, whether or not you have filed a lawsuit or made ples: Accidents, employment disputes, insurance claims, or rights to sue | a demand for payment | |
| | | Describe each claim | | |
| | ■ No | contingent and unliquidated claims of every nature, including counterc | laims of the debtor and rights to | set off claims |
| | | Describe each claim | | |
| | ■ No | nancial assets you did not already list Give specific information | | |
| 36 | | the dollar value of all of your entries from Part 4, including any entries fart 4. Write that number here | | \$0.00 |
| Pa | rt 5: Des | scribe Any Business-Related Property You Own or Have an Interest In. List any r | eal estate in Part 1. | |
| _ | | own or have any legal or equitable interest in any business-related property? to Part 6. | | |
| | ☐ Yes. G | Go to line 38. | | |
| Pa | | escribe Any Farm- and Commercial Fishing-Related Property You Own or Have ar you own or have an interest in farmland, list it in Part 1. | ı Interest In. | |
| 46. | | u own or have any legal or equitable interest in any farm- or commercia Go to Part 7. | I fishing-related property? | |
| | ☐ Yes. | s. Go to line 47. | | |
| Pa | rt 7: | Describe All Property You Own or Have an Interest in That You Did Not List Ab | iove | |
| | Examp | u have other property of any kind you did not already list? poles: Season tickets, country club membership | | |
| | ■ No □ Yes. | Give specific information | | |
| 54 | . Add t | the dollar value of all of your entries from Part 7. Write that number her | e | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 5

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| | Docume | 111 | i age o oi - c | , | |
|------------|--|-----|---------------------------|-----------------------------|--------------|
| Deb Deb | tor 1 Anthony J Bersito Josephine A. Bersito | | | Case number (if known) _1 | 9-32152 |
| Part | 8: List the Totals of Each Part of this Form | | | | _ |
| 55. | Part 1: Total real estate, line 2 | | | | \$196,185.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$5,252.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$0.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$0.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | +_ | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | _ | \$5,252.00 | Copy personal property tota | \$5,252.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | - | \$201,437.00 |

Official Form 106A/B Schedule A/B: Property page 6

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| | | Docume | ni raye 3 01 40 | |
|---------------------|--------------------------|---------------------|-----------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Anthony J Bersit | 0 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Josephine A. Ber | rsito | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JER | SEY | |
| Case number | 19-32152 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106C | | | |

Brief description:

3.

Line from Schedule A/B:

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | |
|---|---|--------------------------------------|--|------------------------------------|--|--|--|
| | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| ■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | | |
| | | Copy the value from | Check only one box for each exemption. | | | | |

100% of fair market value, up to any applicable statutory limit

| • | laiming a homestead exemption of more than \$170,350? adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) |
|------|---|
| No | |
| Yes. | Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |
| | No |
| | Yes |

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| | | Document P | age 10 (| of 48 | | |
|---|--------------|---|---------------|---|--|-------------------|
| Fill in this information to ide | entify you | | | | | |
| Debtor 1 Anthony | J Bers | ito | | | | |
| First Name | | Middle Name La | ast Name | | | |
| Debtor 2 Josephi | ne A. Be | ersito | | | | |
| (Spouse if, filing) First Name | | Middle Name La | ast Name | | | |
| United States Bankruptcy Cou | ırt for the: | DISTRICT OF NEW JERSEY | | | | |
| Case number 19-32152 | | | | | ☐ Check | c if this is an |
| | | | | | | ded filing |
| | | Who Have Claims Se | | <u> </u> | | 12/15 |
| | | f two married people are filing together, to out, number the entries, and attach it to the | | | | |
| 1. Do any creditors have claims s | secured by | your property? | | | | |
| ☐ No. Check this box and | d submit th | nis form to the court with your other sch | nedules. You | ı have nothing else t | o report on this form. | |
| Yes. Fill in all of the info | | , | | J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | | Delow. | | | | |
| Part 1: List All Secured C | laims | | | Column A | Column B | Column C |
| | | nore than one secured claim, list the creditor | | | | |
| | | a particular claim, list the other creditors in leal order according to the creditor's name. | Part 2. AS | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | | | | value of collateral. | claim | If any |
| 2.1 Ally Financial | | Describe the property that secures the | | \$6,669.00 | \$5,252.00 | \$1,417.00 |
| Creditor's Name | | 2018 Chevy Malibu 130,000 mil Location: 209 Winding Way Ro Stratford NJ 08084 | | | | |
| P.o. Box 380901 | | As of the date you file, the claim is: Chec | ck all that | | | |
| Bloomington, MN 55 | 438 | apply. Contingent | | | | |
| Number, Street, City, State & Zip | Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? Check one | e. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mort | tgage or secu | red | | |
| Debtor 2 only | | car loan) | | | | |
| ■ Debtor 1 and Debtor 2 only | | ☐ Statutory lien (such as tax lien, mechan | nic's lien) | | | |
| ☐ At least one of the debtors and | another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to community debt | а | Other (including a right to offset) | | | | |
| Oper | ned | | | | | |

3307

Last 4 digits of account number

02/17 Last Active

Date debt was incurred 10/02/19

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| Debtor 1 Anthony J Bersito | | Case number (if known) | 19-32152 |
|--|--|-------------------------------------|--|
| First Name Middle Na | ame Last Name | | |
| Debtor 2 Josephine A. Bersito | | | |
| First Name Middle Na | ame Last Name | | |
| 2.2 Bankamerica | Describe the property that secures the clai | | \$196,185.00 \$0.00 |
| Creditor's Name | 209 Winding Way Road Stratford, 08084 Camden County | NJ | |
| 4909 Savarese Circle Tampa, FL 33634 | As of the date you file, the claim is: Check al apply. ☐ Contingent | II that | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage | ge or secured | |
| Debtor 2 only | car loan) | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's | s lien) | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | , | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mort | gage | |
| Opened 12/28/04 Last Active 8/17/12 | Last 4 digits of account number | 7701 | |
| Add the dollar value of your entries in C | olumn A on this page. Write that number her | re: \$145,996 | 311 |
| If this is the last page of your form, add | | | |
| Write that number here: | , , , , , , , , , , , , , , , , , , , | \$145,996 | 0.11 |
| Part 2: List Others to Be Notified fo | r a Debt That You Already Listed | | |
| trying to collect from you for a debt you or | e notified about your bankruptcy for a debt t we to someone else, list the creditor in Part you listed in Part 1, list the additional credit is page. | 1, and then list the collection age | ency here. Similarly, if you have more |
| Name, Number, Street, City, State & Z KML Law Group, PC | Zip Code | On which line in Part 1 did you ent | er the creditor? _2.2_ |
| 216 Haddon Avenue Suite 406 Westmont, NJ 08108 | | Last 4 digits of account number | _ |
| Name, Number, Street, City, State & 2 Sps Select Portfolio Service | • | On which line in Part 1 did you ent | |
| PO Box 65450 Salt Lake City, UT 84165 | | Last 4 digits of account number | _ |

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| | | Document | Page 12 | 2 01 48 | |
|---|--|--|---|---|--|
| Fill in this inf | formation to identify your | case: | | | |
| Debtor 1 | Anthony J Bersito | • | | | |
| 20010 | First Name | Middle Name | Last Name | | |
| Debtor 2 | Josephine A. Bers | sito | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | DISTRICT OF NEW JERSEY | , | | |
| Case number | 19-32152 | | | | |
| (if known) | 10 02102 | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official Fo | orm 106E/F | | | | |
| | | ho Have Unsecured | l Claims | | 12/15 |
| any executory of Schedule G: Ex Schedule D: Cro left. Attach the | contracts or unexpired leases secutory Contracts and Unexp editors Who Have Claims Sec | that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is | list executory of Do not include needed, copy | ontracts on Schedule A/B: Pro any creditors with partially sec the Part you need, fill it out, nu | RIORITY claims. List the other party to perty (Official Form 106A/B) and on cured claims that are listed in mber the entries in the boxes on the of any additional pages, write your |
| Part 1: Lis | t All of Your PRIORITY Un | secured Claims | | | |
| 1. Do any cre | editors have priority unsecure | d claims against you? | | | |
| No. Go | to Part 2. | | | | |
| ☐ Yes. | | | | | |
| Part 2: Lis | at All of Your NONPRIORIT | V Unsecured Claims | | | |
| | editors have nonpriority unsec | | | | |
| | | | | | |
| ☐ No. You | u have nothing to report in this pa | art. Submit this form to the court with | h your other sche | edules. | |
| Yes. | | | | | |
| unsecured | claim, list the creditor separately | aims in the alphabetical order of t r for each claim. For each claim liste st the other creditors in Part 3.If you | ed, identify what t | ype of claim it is. Do not list claim | ns already included in Part 1. If more |
| | | | | | Total claim |
| 4.1 Axcs | ssfn/cngo | Last 4 digits of ac | count number | 5237 | \$0.00 |
| | iority Creditor's Name | | | | |
| 7755 | Montgomery Rd | When was the del | at incurred? | Opened 06/16 Last Ac 12/24/16 | tive |
| | innati, OH 45236 | When was the der | ot incurreu : | 12/24/10 | |
| | er Street City State Zip Code | As of the date you | I file, the claim | s: Check all that apply | |
| _ | ncurred the debt? Check one. | _ | | | |
| | btor 1 only | ☐ Contingent | | | |
| ☐ De | btor 2 only | ☐ Unliquidated | | | |
| ☐ De | btor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At | least one of the debtors and and | | RITY unsecure | d claim: | |
| | eck if this claim is for a comr | | | | |
| debt Is the | claim subject to offset? | ☐ Obligations aris report as priority class | | ration agreement or divorce that | you did not |
| ■ No | • | | | g plans, and other similar debts | |
| | | • | • | 3 F Gard Carlot Christian GODIO | |
| ☐ Ye | S | Other. Specify | onsecured | | |

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| | Josephine A. Bersito | | Case number (if known) | 19-32152 | |
|-----|---|--|--------------------------------|------------------|--------|
| 4.2 | Axcssfn/cngo Nonpriority Creditor's Name | Last 4 digits of account number | 2509 | | \$0.00 |
| | 7755 Montgomery Rd Cincinnati, OH 45236 | When was the debt incurred? | Opened 12/15 Last 12/17/15 | Active | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | bts | |
| | Yes | Other. Specify Unsecured | | | |
| 4.3 | Axcssfn/cngo | Last 4 digits of account number | 8493 | | \$0.00 |
| | Nonpriority Creditor's Name 7755 Montgomery Rd Cincinnati, OH 45236 | When was the debt incurred? | Opened 09/16 Last 3/29/17 | Active | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | \square Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar de | bts | |
| | Yes | Other. Specify Unsecured | | | |
| 4.4 | Axcssfn/cngo Nonpriority Creditor's Name | Last 4 digits of account number | 5578 | | \$0.00 |
| | 7755 Montgomery Rd Cincinnati, OH 45236 | When was the debt incurred? | Opened 06/16 Last 8/23/16 | Active | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar de | bts | |
| | Yes | Other. Specify Unsecured | | | |
| | | | | | |

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| | r 1 Anthony J Bersito r 2 Josephine A. Bersito | | Case number (if known) 19-32152 | |
|-----|---|---|--|------------|
| 4.5 | Capital One Bank Usa N | Last 4 digits of account number | 1586 | \$3,033.00 |
| | Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code | When was the debt incurred? As of the date you file, the claim | Opened 05/15 Last Active 6/18/15 s: Check all that apply | |
| | Who incurred the debt? Check one. ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.6 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 3837 | \$0.00 |
| | Po Box 30281 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 3/05/12 Last Active 8/23/13 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.7 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 4800 | Unknown |
| | Po Box 30281 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 12/07 Last Active 8/22/13 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | |

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| | r 1 Anthony J Bersito r 2 Josephine A. Bersito | | Case number (if known) 19-32152 | |
|-----|---|--|--|------------|
| 4.8 | Cb Indigo/gf Nonpriority Creditor's Name | Last 4 digits of account number | 1997 | \$0.00 |
| | Po Box 4499 Beaverton, OR 97076 | When was the debt incurred? | Opened 7/12/18 Last Active 08/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Carc | | |
| 4.9 | Cb Indigo/gf Nonpriority Creditor's Name | Last 4 digits of account number | 5709 | \$0.00 |
| | Po Box 4499 Beaverton, OR 97076 | When was the debt incurred? | Opened 10/16/18 Last Active 10/31/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d alaim. | |
| | At least one of the debtors and another | Student loans | a ciaim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | Diaz Assocs | Last 4 digits of account number | 56N1 | \$5,220.00 |
| | Nonpriority Creditor's Name 17731 Irvine Blvd. Tustin, CA 92780 | When was the debt incurred? | Opened 11/16/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | • | |
| | ☐ Yes | Other. Specify 08 Check N | Go | |

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| | or 1 Anthony J Bersito Josephine A. Bersito | | Case number (if known) 19-32152 | |
|----------|--|--|---|------------|
| 4.1 1 | Discover Fin Svcs Llc | Last 4 digits of account number | 5863 | \$1,347.00 |
| • | Nonpriority Creditor's Name | _ | | |
| | Pob 15316 Wilmington, DE 19850 | When was the debt incurred? | Opened 06/15 Last Active 1/23/17 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 2 | First Premier Bank | Last 4 digits of account number | 0652 | \$1,355.00 |
| | Nonpriority Creditor's Name 3820 N Louise Ave Sioux Falls, SD 57107 | When was the debt incurred? | Opened 12/18 Last Active 3/17/19 | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 3 | First Premier Bank | Last 4 digits of account number | 5123 | \$0.00 |
| | Nonpriority Creditor's Name | | Opened 11/16 Last Active | |
| | 3820 N Louise Ave Sioux Falls, SD 57107 | When was the debt incurred? | 3/28/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Credit Card | I | |
| | | | | |

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| | 1 Anthony J Bersito 2 Josephine A. Bersito | | | |
|----------|--|--|--|------------|
| 4.1 | First Premier Bank | Last 4 digits of account number | 5103 | \$0.00 |
| | Nonpriority Creditor's Name 3820 N Louise Ave Sioux Falls, SD 57107 | When was the debt incurred? | Opened 1/01/08 Last Active 5/21/12 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | Hann Financial Service | Last 4 digits of account number | 8951 | \$0.00 |
| | Nonpriority Creditor's Name One Center Drive Jamesburg, NJ 08831 | When was the debt incurred? | Opened 12/06 Last Active 9/26/11 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Automobile | 3 | |
| 4.1 6 | Mariner Finance | Last 4 digits of account number | 2218 | \$1,380.00 |
| | Nonpriority Creditor's Name 8211 Town Center Dr Nottingham, MD 21236 | When was the debt incurred? | Opened 01/19 Last Active 10/28/19 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | a plane, and other similar debt- | |
| | ■ No | Debts to pension or profit-sharin | g pians, and other similar debts | |
| | Yes | Other. Specify Secured | | |

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| Josephine A. Bersito | | Case number (if known) | 19-32152 | |
|--|--|--------------------------------|------------------|------------|
| Merrick Bank Corp | Last 4 digits of account number | 9023 | | \$1,735.00 |
| Nonpriority Creditor's Name | _ | | | |
| Po Box 9201 Old Bethpage, NY 11804 | When was the debt incurred? | Opened 12/14 Las 10/16/19 | t Active | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| Yes | Other. Specify Credit Card | d | | |
| National Credit Adjust | Last 4 digits of account number | 5237 | | \$4,685.00 |
| Nonpriority Creditor's Name | | | | ψ 1,000.01 |
| P.o. Box 550 Hutchinson, KS 67504 | When was the debt incurred? | Opened 07/17 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| Yes | Other. Specify Factoring (| Company Account Cl | heck N Go | |
| Nissan-infiniti Lt | Last 4 digits of account number | 0368 | | \$1,599.00 |
| Nonpriority Creditor's Name | _ | 0 | | |
| Pob 660366 Dallas, TX 75266 | When was the debt incurred? | Opened 07/17 Las 10/31/19 | T ACTIVE | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | |
| Who incurred the debt? Check one. | | | | |
| ☐ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community debt | nity ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | |
| Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | tnat you aid not | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| □Yes | Other. Specify 2017 Nissa | | | |

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| | or 1 Anthony J Bersito Or 2 Josephine A. Bersito | | Case number (if known) 19-32152 | |
|----------|---|--|--|-------------|
| 4.2 | Nissan-infiniti Lt | Last 4 digits of account number | 9114 | \$0.00 |
| 0 | Nonpriority Creditor's Name | | | |
| | Pob 660366 Dallas, TX 75266 | When was the debt incurred? | Opened 12/14 Last Active 8/09/17 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | Пол | | |
| | Debtor 2 only | ☐ Contingent | | |
| | _ | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another | Student loans | a diami. | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ■ No | Other. Specify Lease | g pians, and onter similar debts | |
| | | · · · · · | | |
| 4.2 1 | Nissan-infiniti Lt | Last 4 digits of account number | 3405 | \$0.00 |
| | Nonpriority Creditor's Name Pob 660366 Dallas, TX 75266 | When was the debt incurred? | Opened 02/09 Last Active 3/21/12 | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Lease | | |
| 4.2 | | | 4000 | |
| 2 | Nissan-infiniti Lt Nonpriority Creditor's Name | Last 4 digits of account number | 4269 | \$0.00 |
| | Pob 660366 Dallas, TX 75266 | When was the debt incurred? | Opened 02/12 Last Active 1/08/15 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Lease | | |
| | | · · · | | |

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| Josephine A. Bersito | | Case number (if known) 19-32152 | |
|--|--|---|----------|
| Noble Fin | Last 4 digits of account number | 4536 | \$0.00 |
| Nonpriority Creditor's Name | _ | | |
| 25331 1h 10 West | When was the debt incurred? | Opened 7/05/16 Last Active 9/14/16 | |
| San Antonio, TX 78257 | _ | 3/14/10 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Secured | | |
| Onemain Financial | Last 4 digits of account number | 9657 | \$0.00 |
| Nonpriority Creditor's Name | | | Ψ0.00 |
| Po Box 1010 Evansville, IN 47706 | When was the debt incurred? | Opened 9/29/11 Last Active 8/30/13 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| _ | <u> </u> | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| _ | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Unsecured | | |
| | | | |
| Pentagon Federal Cr Un Nonpriority Creditor's Name | Last 4 digits of account number | <u>5777</u> | \$500.00 |
| 1001 N. Fairfax Alexandria, VA 22314 | When was the debt incurred? | Opened 09/16 Last Active 5/26/17 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | • | |
| ■ No | Debts to pension or profit-sharing | | |
| Yes | ■ Other. Specify Check Cree | dit Or Line Of Credit | |

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| Portfolio Recov Assoc | | | | |
|---|---|--------------------------------|------------------|------------|
| Portfolio Recov Assoc Nonpriority Creditor's Name 120 Corporate Blvd Ste 100 | Last 4 digits of account number | 2322 | | \$1,528.00 |
| 120 Corporate Blvd Ste 100 Norfolk, VA 23502 | When was the debt incurred? | Opened 03/17 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce | that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar de | bts | |
| ☐ Yes | ■ Other. Specify ■ Other Specify | Company Account Ca I.A. | pital One | |
| Select Portfolio Svcin | Last 4 digits of account number | 1216 | | \$0.00 |
| Nonpriority Creditor's Name 10401 Deerwood Park Blvd Jacksonville, FL 32256 | When was the debt incurred? | Opened 12/28/04 La 12/13/13 | ast Active | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| ■ Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce | that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar de | bts | |
| Yes | Other. Specify Real Estate | Mortgage | | |
| Tbom/total Crd | Last 4 digits of account number | 5209 | | \$0.00 |
| Nonpriority Creditor's Name Po Box 85710 Sioux Falls, SD 57118 | When was the debt incurred? | Opened 1/25/19 La 5/31/19 | ast Active | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar de | bts | |
| ☐ Yes | ■ Other. Specify Credit Card | 1 | | |

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| Tbom/total Crd | Last 4 digits of account number | 3153 | | \$0.00 |
|--|--|--------------------------------|------------------|--------|
| Nonpriority Creditor's Name | _ | 0 | | |
| Po Box 85710 Sioux Falls, SD 57118 | When was the debt incurred? | Opened 7/14/15 La 9/22/15 | ast Active | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. | | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar de | ebts | |
| Yes | Other. Specify Credit Card | d . | | |
| Westcreek Fi | Last 4 digits of account number | 22X1 | | \$0.00 |
| Nonpriority Creditor's Name | _ | | | |
| 4951 Lake Brook Dr Glen Allen, VA 23060 | When was the debt incurred? | Opened 11/12/18 L 1/24/19 | .ast Active | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| □ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| Yes | Other. Specify Lease | | | |
| Your Credit | Last 4 digits of account number | 5781 | | \$0.00 |
| Nonpriority Creditor's Name | _ | | | |
| 25331 1h 10 West San Antonio, TX 78257 | When was the debt incurred? | Opened 7/05/16 La 9/14/16 | ast Active | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| ■ Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar de | ebts | |
| Yes | Other. Specify Secured | | | |

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| Your Credit | Last 4 digits of account number | 5784 | |
|--|--|---|--|
| Nonpriority Creditor's Name 25331 1h 10 West San Antonio, TX 78257 | When was the debt incurred? | Opened 7/05/16 Last Active 9/14/16 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------------------|------------|---|------------|------------------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | 6f. | Student loans | 6f. | \$ Total Claim 0.00 |
| Total claims from Part 2 | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 22,382.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 22,382.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|---------------------|-----------|--------------------------------------|
| Debtor 1 | Anthony J Bersit | 0 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Josephine A. Ber | rsito | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JEI | RSEY | |
| _ | 19-32152 | | | — 0 |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|--|
| 2.1 Nissan-infiniti Lt Pob 660366 Dallas, TX 75266 | Acct# 25007950368 Opened Opened 07/17 Last Active 10/31/19 Lease |

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| | | Docume | ili raye 20 0i | 1 4 0 | |
|--------------------------------------|--|---|---|--|----------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Anthony J Bersit | 0 | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Josephine A. Ber | sito | | | |
| (Spouse if, filin | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | DISTRICT OF NEW JE | RSEY | | |
| Case numb | per 19-32152 | | | | |
| (if known) | | | | ☐ Check if this is an amended filing | |
| Official | Form 106H | | | | |
| | l Form 106H l ule H: Your Cod | obtore | | 42/4 | E |
| Scried | ule H. Toul Cou | enroi 2 | | 12/1 | <u> </u> |
| Arizon: No. Yes 3. In Coli in line | hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. b. Did your spouse, former spou umn 1, list all of your codebt 2 again as a codebtor only i | Nevada, New Mexico, Pu use, or legal equivalent liv ors. Do not include your f that person is a guarar | e with you at the time? r spouse as a codebtor or cosigner. Make s | I? (Community property states and territories include ngton, and Wisconsin.) if your spouse is filing with you. List the person shour you have listed the creditor on Schedule D (Off 6G). Use Schedule D, Schedule E/F, or Schedule G to | icial |
| out Co | olumn 2. | · · · · · · · · · · · · · · · · · · · | | | |
| | Column 1: Your codebtor Name, Number, Street, City, State and Zi | P Code | | Column 2: The creditor to whom you owe the de Check all schedules that apply: | bt |
| 2.1 | | | | Cohodulo D. lino | |
| 3.1 | Name | | | _ □ Schedule D, line □ Schedule E/F, line | |
| | | | | ☐ Schedule C, line | |
| - | | | | | |
| | Number Street City | State | ZIP Code | | |
| | ∵. , | | 2 0006 | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |

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| E | | | | | | Ī | | | | | |
|-------------|--|--------------------------|-------------------------------|-------------|-------|---------------------------------------|--------------------------------|---|----------|--|--|
| | in this information to identify your cotor 1 Anthony J E | | | | | | | | | | |
| | otor 2 Josephine A | A. Bersito | | | _ | | | | | | |
| Uni | ted States Bankruptcy Court for the | : DISTRICT OF NEW | JERSEY | | _ | | | | | | |
| Cas | se number 19-32152 | | | | | Check if this is | : | | | | |
| (If kr | nown) | | - | | | ☐ An amende | ed filing | | | | |
| | | | | | | A supplem 13 income | | ng postpetition ollowing date: | | | |
| 0 | fficial Form 106I | | | | | MM / DD/ \ | YYYY | | | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 | | |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment information | r spouse is not filing w | ith you, do not inclu | ıde infori | mati | on about your sp I case number (if | ouse. If m known). <i>I</i> | ore space is | needed, | | |
| | information. | | | | | | | illing spouse | | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | mployment status Employed | | | | | ■ Employed□ Not employed | | | |
| | employers. | Occupation | Retired | | | Retired | I | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | | |
| | | How long employed t | here? | | | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | | | |
| spou | mate monthly income as of the duse unless you are separated. | • | , , | • | | | · | • | J | | |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | n for all e | emple | oyers for that perso | on on the li | ines below. If y | you need | | |
| | | | | | | For Debtor 1 | | btor 2 or ing spouse | | | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | 0.00 | | | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | | | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | 0.00 | | | |

| | tor 1 tor 2 | Anthony J Bersito Josephine A. Bersito | _ | Case | e number (<i>if known</i>) | 19 | D-32152 | |
|-----|----------------|---|-------------|-----------|------------------------------|----------|-----------------------------------|--------|
| | | | | | r Debtor 1 | no | For Debtor 2 or non-filing spouse | |
| | Cop | y line 4 here | 4. | \$_ | 0.00 | \$ | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | | |
| | 5e. | Insurance | 5e. | \$_ \$ | 0.00 | \$ | 0.00 | |
| | 5f. 5g. | Domestic support obligations Union dues | 5f. 5g. | \$ \$ | 0.00 | \$ | | |
| | 5g. 5h. | Other deductions. Specify: | 5g. 5h.+ | | 0.00 | ٠. | | |
| 6. | - | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ | 0.00 | \$ | | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | | |
| | | • | •• | Ψ – | 0.00 | Ψ. | 0.00 | |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$_ | 0.00 | \$ | | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | 8c. | \$_ | 0.00 | \$ | | |
| | 8d. 8e. | Unemployment compensation Social Security | 8d. 8e. | \$_ \$ | 0.00 | \$ \$ | | |
| | ое. 8f. | Other government assistance that you regularly receive | oe. | Φ_ | 1,888.00 | Φ | 1,532.00 | |
| | Oi. | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | | |
| | 8h. | Other monthly income. Specify: VA Benefit | 8h.+ | \$ | 964.36 | + \$ | 0.00 | |
| | | Virtua Pension | _ | \$_ | 0.00 | \$ | 829.55 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 2,852.36 | \$ | 2,361.55 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 2,852.36 + \$_ | | 2,361.55 = \$5, | 213.91 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | r depen | | • | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailes | | | | | t | 213.91 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | 1? | | | | Combined monthly in | |
| | | No. Yes. Explain: | | | | — | | |

| Debtor 1 | Fill | in this informa | ition to identify yo | our case: | | | ı | | |
|--|------------------|--|-------------------------------------|------------------------|--|-------------------------|----------------------|-------------------|--|
| Debtor 2 Josephine A. Bersito An amended filing An applement showing posipetition chapter (Spoune, if filing) Indicates Bankeuptcy Court for that: DISTRICT OF NEW JERSEY MM / DD / YYYY Description 19-32152 MM / DD / YYYY | | | | | | | Cho | ak if this is: | |
| United States Bankrupty Court for the: DISTRICT OF NEW JERSEY United States Bankrupty Court for the: DISTRICT OF NEW JERSEY Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Date of the state of the st | Deb | NOI I | Anthony J B | ersito | | | | | |
| United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY DISTRICT OF NEW JERSEY | | | Josephine A | . Bersito | | | | | |
| Case number 19-32152 (If krown) Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II: Describe Your Household Is this a joint case? No, Go to line 2. Yes. Dest Debtor 2 live in a separate household? No On on list Debtor 1 and Pyes. Fill out this information for such dependent's relationship to Dependent's relationship to Debtor 2. Do you have dependents? Do not state the dependents names. Part II: Describe Your Property of the Property of th | (Spc | ouse, ir filing) | | | | | | то ехрепоео ао ог | the following date. |
| Official Form 106J Schedule J: Your Expenses 12/11 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part II Describe Your Household I Is this a joint case? No. Go to line 2 Yes. Debtor 2 live in a separate household? No. Go to line 2 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Pyes. Fill out this information for Debtor 2 age investigation and provided in the dependent investigation and provided and provided in the dependent and your dependent and your dependent provided in an accurate the dependent and your dependent provided in an accurate provided in the policy of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. 5 0.00 According to the form and provided in the dependent and upkeep expenses and the policy of the form and provided and the meaning and provided in a control of the provided payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. 5 0.00 According to the form and provided and upkeep expenses According the form and provided and upkeep expenses According to the form and fill in the provided and upkeep expenses According to the form and fill in the provided to the provided and upkeep expenses According to the form and fill in the provided to the provi | Unit | ed States Bankı | ruptcy Court for the | : DISTRI | CT OF NEW JERSEY | | | MM / DD / YYYY | |
| Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household | | | 9-32152 | | | | | | |
| Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household | Of | fficial Fo | rm 106J | | | | - | | |
| Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No No No Yes. Fill out this information for each dependent | So Be info | chedule as complete ormation. If m | J: Your and accurate as | possible. | If two married people are ch another sheet to this t | | | | or supplying correct |
| No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. No. Correct Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Correct Separate Household of Debtor 2. Do not state the dependents names. No. Correct Separate Household of Debtor 2. Do not state the dependents names. No. Correct Separate Household of Debtor 2. No. Correct Separate Household of Debtor 2. No. Correct Separate Household of Debtor 2. Do not state the dependents names. No. Correct Separate Household of Debtor 2. No. Correct Separate Household of Debtor 2. No. Correct Separate Household of Debtor 2. Dependent's relationship to Dependent's relationship to Debtor 1 or Debtor 2. No. Correct Separate Household of Debtor 2. No. Correct Separate Household of Debtor 2. Dependent's relationship to Dependent's relationship to Debtor 1 or Debtor 2. No. Correct Separate Household of Debtor 2. Dependent's relationship to Dependent's relationship to Debtor 1 or Debtor 2. No. Correct Separate Household of Debtor 2. Dependent's relationship to Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 2. No. Correct Separate Household Debtor 2. Dependent's relationship to Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or Debtor 2. No. Correct Separate Household Debtor 1 or De | | | | hold | | | | | |
| No | ١. | | | | | | | | |
| No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Per Separate Household of Debt | | | | in a separa | ate household? | | | | |
| Do not list Debtor 1 and | | | - | st file Offici | al Form 106J-2, <i>Expens</i> es | for Separate House | e <i>hold</i> of Deb | otor 2. | |
| Do not list Debtor 1 and | 2 | Do you have | e denendents? | ■ No | | | | | |
| Do not state the dependents names. No Yes Yes No Yes Yes No Yes Ye | ۷. | Do not list D | • | _ | | | | • | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 105.00 105.00 106.00 | | Do not state | | | | | | | ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues | | expenses o yourself and | f people other to d your depende | han nts? □ | Yes | | | | ☐ Yes |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 1,372.23 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | Est exp | imate your ex enses as of a | cpenses as of you | our bankrı | uptcy filing date unless y | | | | |
| payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 1,372.23 4a. \$ 0.00 4b. \$ 0.00 4c. Homeowner's association or condominium dues 4d. \$ 0.00 | the | value of sucl | h assistance an | non-cash d have inc | government assistance it luded it on <i>Schedule I:</i> Y | you know Your Income | | Your exp | enses |
| 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00 105.00 105.00 105.00 | 4. | | | | | nclude first mortgag | e 4. S | . | 1,372.23 |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | | If not includ | led in line 4: | | | | | | |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | | 4a. Real e | estate taxes | | | | 4a. 9 | \$ | 0.00 |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | | | | s, or renter | 's insurance | | | · | |
| | | | | | | | | | |
| | 5. | | | | | me equity loans | | · | |

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| Debtor Debtor | | | J Bersito ne A. Bersito | Case nu | mber (if known) | 19-32152 |
|------------------|-------------|----------|---|-----------------|---------------------------------------|-------------------------------|
| 6. U | Itilities: | | | | | |
| | | tricity. | heat, natural gas | 6a | . \$ | 170.00 |
| 6 | | | wer, garbage collection | 6b | | 0.00 |
| | | | e, cell phone, Internet, satellite, and cable services | 60 | | 150.00 |
| 6 | | r. Spe | | 60 | . \$ | 0.00 |
| 7. F | | | ekeeping supplies | 7 | · - | 650.00 |
| | | | hildren's education costs | 8 | | 0.00 |
| - | | | ry, and dry cleaning | 9 | | 50.00 |
| | | | roducts and services | 10 | · · | 150.00 |
| | | • | ntal expenses | 11 | · · · · · · · · · · · · · · · · · · · | 0.00 |
| | | | Include gas, maintenance, bus or train fare. | | . Ψ | 0.00 |
| | | | ar payments. | 12 | . \$ | 0.00 |
| | | | clubs, recreation, newspapers, magazines, and books | 13 | . \$ | 0.00 |
| | | | ributions and religious donations | 14 | . \$ | 0.00 |
| | nsurance. | | • | | · | |
| D | o not inclu | ude in | surance deducted from your pay or included in lines 4 or 20. | | | |
| 1 | 5a. Life i | nsura | nce | 15a | . \$ | 425.00 |
| 1: | 5b. Healt | th ins | urance | 15b | . \$ | 0.00 |
| 1: | 5c. Vehic | cle ins | surance | 150 | :. \$ | 195.00 |
| 1 | 5d. Othe | r insu | rance. Specify: | 15d | . \$ | 0.00 |
| 16. T | axes. Do | not in | clude taxes deducted from your pay or included in lines 4 or 20. | | | |
| | pecify: | | , , , | 16 | . \$ | 0.00 |
| 17. lr | nstallmen | t or le | ease payments: | | | |
| 1 | 7a. Car p | oayme | ents for Vehicle 1 | 17a | . \$ | 199.99 |
| 1 | 7b. Car p | oayme | ents for Vehicle 2 | 17b | . \$ | 195.00 |
| 1 | 7c. Othe | r. Spe | ecify: | 17c | :. \$ | 0.00 |
| 1 | 7d. Othe | r. Spe | ecify: | 17d | . \$ | 0.00 |
| 18. Y | our paym | nents | of alimony, maintenance, and support that you did not repo | ort as | | |
| | | | your pay on line 5, Schedule I, Your Income (Official Form 1 | 06I). 18 | · | 0.00 |
| 19. O | ther payn | nents | s you make to support others who do not live with you. | | \$ | 0.00 |
| | pecify: | | | 19 | | |
| | | | erty expenses not included in lines 4 or 5 of this form or on | | | |
| 2 | 0a. Morto | gages | s on other property | 20a | · - | 0.00 |
| 2 | 0b. Real | estat | e taxes | 20b | · | 0.00 |
| 2 | 0c. Prop | erty, ł | nomeowner's, or renter's insurance | 200 | :. \$ | 0.00 |
| 2 | 0d. Main | tenan | ice, repair, and upkeep expenses | 200 | . \$ | 0.00 |
| 2 | 0e. Home | eown | er's association or condominium dues | 20e | . \$ | 0.00 |
| 21. O | ther: Spe | cify: | | 21 | . +\$ | 0.00 |
| | | • | | | | |
| | - | | monthly expenses | | | |
| | | | through 21. | | \$ | 3,662.22 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form 106 | 5J-2 | \$ | |
| 2 | 2c. Add lir | ne 22a | a and 22b. The result is your monthly expenses. | | \$ | 3,662.22 |
| 22 € | 'alculato y | vour r | monthly net income. | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a | ¢ | E 212 01 |
| | | | monthly expenses from line 22c above. | | . •\$ | 5,213.91 |
| ۷. | зв. Сору | / youi | monthly expenses from the 22c above. | 230 | · -• | 3,662.22 |
| 2 | 3c Subti | ract w | our monthly expenses from your monthly income. | | | |
| ۷. | | | is your monthly net income. | 230 | :. \$ | 1,551.69 |
| | 11101 | Jouit | to your monthly not moonto. | | | |
| 24. D | o you exi | pect a | an increase or decrease in your expenses within the year af | ter you file th | is form? | |
| F | or example, | , do yo | ou expect to finish paying for your car loan within the year or do you expe | | | ease or decrease because of a |
| | _ | to the | terms of your mortgage? | | | |
| | No. | | | | | |
| | ☐ Yes. | | Explain here: | | | |

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| Fill in this info | ormation to identify your | case: | | |
|---------------------|---------------------------|----------------------|-----------|--------------------------------------|
| Debtor 1 | Anthony J Bersit | 0 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Josephine A. Ber | sito | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the: | DISTRICT OF NEW JERS | EY | |
| Case number | 19-32152 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | Sign Below | | |
|-------|--|------|---|
| Did y | — you pay or agree to pay someone who is NOT an attorney to I | nelp | ງ you fill out bankruptcy forms? |
| | No | | |
| | Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | r penalty of perjury, I declare that I have read the summary an hey are true and correct. | nd s | schedules filed with this declaration and |
| X / | s/ Anthony J Bersito | X | /s/ Josephine A. Bersito |
| _ | Anthony J Bersito | | Josephine A. Bersito |
| S | Signature of Debtor 1 | | Signature of Debtor 2 |
| С | Date December 12, 2019 | | Date December 12, 2019 |

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| Fill | l in this i | information to identify yo | our case: | | | |
|-------|---------------------------|--------------------------------------|--|----------------------------------|------------------------------|---------------------|
| De | ebtor 1 | Anthony J Ber | sito | | | |
| _ | | First Name | Middle Name | Last Name | | |
| | btor 2 ouse if, filing | Josephine A. E | Bersito Middle Name | Last Name | | |
| | | 5 , | | | | |
| Un | ited State | es Bankruptcy Court for the | e: DISTRICT OF NEW JER | SEY | | |
| Ca | se numb | per 19-32152 | | | | |
| (if k | known) | | | | | Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| Of | fficial | Form 107 | | | | |
| | | | Affairs for Indivi | duals Filing for B | ankruptcy | 4/19 |
| | | | | | | |
| | | | ssible. If two married people d, attach a separate sheet to | | | |
| | | known). Answer every qu | • | | , | |
| Pa | rt 1: | Give Details About Your I | Marital Status and Where Yo | u Lived Before | | |
| | | | .42 | | | |
| 1. | wnat is | s your current marital sta | itus? | | | |
| | □ ма | arried | | | | |
| | | ot married | | | | |
| 2. | During | the last 3 years, have yo | u lived anywhere other than | where you live now? | | |
| | _ ` | | • | • | | |
| | ■ No | | | | | |
| | ⊔ Y€ | es. List all of the places you | u lived in the last 3 years. Do r | ot include where you live now | <i>1</i> . | |
| | Debto | r 1 Prior Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dress: | Dates Debtor 2 |
| | | | lived there | | | lived there |
| 3. | | | ever live with a spouse or le | | | |
| stat | tes and te | <i>erritories</i> include Arizona, (| California, Idaho, Louisiana, Ne | evada, New Mexico, Puerto R | co, Texas, Washington and V | Visconsin.) |
| | ■ No | 0 | | | | |
| | ☐ Ye | es. Make sure you fill out S | Schedule H: Your Codebtors (C | Official Form 106H). | | |
| | | | | | | |
| Pa | rt 2 | Explain the Sources of Yo | our Income | | | |
| 4. | Did vo | u have any income from | employment or from operation | ng a business during this ve | ear or the two previous cale | ndar vears? |
| | Fill in th | ne total amount of income | you received from all jobs and | all businesses, including part- | time activities. | • |
| | ir you a | are filing a joint case and yo | ou have income that you receive | e togetner, list it only once ur | ider Debtor 1. | |
| | ■ No | 0 | | | | |
| | □ Ye | es. Fill in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and | Check all that apply. | (before deductions |
| | | | | exclusions) | | and exclusions) |
| | | | | | | |

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| | btor 1 btor 2 | | sephine A | | | | | Ca | ase number (if known) | 19-32152 | ! |
|--|--|--------------|----------------|--|----------------------------|---|----------------------------------|--|--|---------------------------|---|
| 5. | Did you receive any other income during thi Include income regardless of whether that incor and other public benefit payments; pensions; re winnings. If you are filing a joint case and you have the company of the com | | | | | ome is taxable. Exa rental income; intereshave income that y | amples o est; divi ou rece | of other income are dends; money colle vived together, list in | e alimony; child supp ected from lawsuits; t only once under D | royalties; an ebtor 1. | |
| | | No Yes. | Fill in the de | etails. | | | | | | | |
| | | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | | Sources of Describe I | of income below. | each (befo | ss income from a source are deductions and asions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: | List | Certain Pa | yments You | Made Befo | ore You Filed for E | Bankruj | ptcy | | | |
| 6. | _ | eithe No. | Neither D | ebtor 1 nor [| Debtor 2 ha | rimarily consumer as primarily consu family, or household | ımer de | bts. Consumer de | <i>bt</i> s are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | | □ No. | 90 days before 90 days before 30 day | , | for bankruptcy, did | d you pa | ay any creditor a to | tal of \$6,825* or mo | re? | |
| | | | ☐ Yes | paid that con not include | editor. Do n payments t | not include payment to an attorney for th | its for do | omestic support ob ruptcy case. | | nild support a | he total amount you and alimony. Also, do |
| Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | | | | | |
| | | | ■ No. | Go to line 7 | 7. | | | | | | |
| | Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to a attorney for this bankruptcy case. | | | | | | | | | | |
| | Cred | ditor' | s Name an | d Address | | Dates of paymer | nt | Total amount paid | Amount you still owe | Was this p | payment for |
| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
| | _ | No Yes. | List all payr | nents to an ir | ısider. | | | | | | |
| | Insider's Name and Address | | | Dates of paymer | nt | Total amount paid | Amount you still owe | Reason fo | or this payment | | |
| 8. | insid | ler? | | | | cy, did you make a | | ments or transfer | any property on a | ccount of a | debt that benefited an |
| | | No | Liot all | nonte te ee ' | oido- | | | | | | |
| | | | Name and | nents to an ir Address | isider | Dates of paymer | nt | Total amount | Amount you still owe | | or this payment editor's name |
| | | | | | | | | paid | Suit Owe | molude cre | FUILUI S HAITIE |

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| | otor 1 Anthony J Bersito Josephine A. Bersito | | Case number (# | known) 19-321 | 19-32152 | | | | | |
|-----|---|--|----------------------------------|-----------------|---------------------------|--|--|--|--|--|
| Pai | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | | | | | |
| 9. | Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes. No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | Status | of the case | | | | | |
| | Unknown Plaintiff vs Unknown Defendant 1329074JHW | BankruptcyChapt er7 | US BKPT CT NJ CAMDEI | ☐ On a | n appeal oncluded | | | | | |
| | | | | Discha | rged - 0.00 | | | | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied Check all that apply and fill in the details below. No. Go to line 11. | | | | | | | | | |
| | Yes. Fill in the information below. Creditor Name and Address | Describe the Property | | Date | Value of the | | | | | |
| | | Explain what happened | 4 | | property | | | | | |
| | Within 90 days before you filed for bankrupt accounts or refuse to make a payment becan a No Yes. Fill in the details. Creditor Name and Address Within 1 year before you filed for bankruptc | use you owed a debt? Describe the action the | e creditor took | Date action wa | s Amount | | | | | |
| | court-appointed receiver, a custodian, or another official? | | | | | | | | | |
| | No No | | | | | | | | | |
| | Yes | | | | | | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | cy, did you give any gifts Describe the gifts | s with a total value of more tha | Dates you gave | | | | | | |
| | per person | | | the gifts | | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |
| 14. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or contributions. | | s or contributions with a total | value of more t | nan \$600 to any charity? | | | | | |
| | Yes. Fill in the details for each gift or contributions to charities that tota | | u contributed | Dates you | Value | | | | | |
| | more than \$600 Charity's Name Address (Number Street City State and ZIP Code) | . Door what you | | contributed | Value | | | | | |

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| | otor 2 | Josephine A. Bersito | | | Case number (if k | nown) 19-32152 | | | | | |
|-----|--|--|----------|--|-------------------|--|------------------------|--|--|--|--|
| Pai | rt 6: | List Certain Losses | | | | | | | | | |
| | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? | | | | | | | | | | |
| | _ | No Yes. Fill in the details. | | | | | | | | | |
| | | cribe the property you lost and the loss occurred | Include | be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B: | ist pending | Date of your oss | Value of property lost | | | | |
| Pai | rt 7: | List Certain Payments or Transfers | S | | | | | | | | |
| 16. | cons | ulted about seeking bankruptcy or | preparii | d you or anyone else acting on your ng a bankruptcy petition? s, or credit counseling agencies for ser | | | rty to anyone you | | | | |
| | _ | No Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | | ′ou | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment | | | | |
| | Law Ass 335 Law | Offices of Georgette Miller and | | Attorney Fees | | | \$1,690.00 | | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | | |
| | _ | No Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | | | Description and value of any prop transferred | | Date payment or transfer was made | Amount of payment | | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | | | |
| | Pers Add | son Who Received Transfer ress | | Description and value of property transferred | | y property or ceived or debts ange | Date transfer was made | | | | |
| 4.6 | | son's relationship to you | | All descriptions of the second | -1644 - 14 - · | an almost a d | of and labor | | | | |
| 19. | bene | ficiary? (These are often called <i>asset</i> No | | did you transfer any property to a s ion devices.) | elf-settled trust | or similar device | of which you are a | | | | |
| | | Yes. Fill in the details. | | Description and value of the prope | erty transferred | | Date Transfer was | | | | |
| | | | | | | | made | | | | |

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Debtor 1 Anthony J Bersito
Debtor 2 Josephine A. Bersito Case number (if known) 19-32152

| Part 8: | List of Certain Financi | al Accounts, Instrument | s. Safe Denosit Boxes | and Storage Units | |
|---------|-------------------------|-------------------------|-----------------------|-------------------|--|

| Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred transferred. 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? I No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | ı aı | List of Certain Financial Accounts, | iisti uilielits, Sale Depos | it boxes, and stor | age onits | | | | | | |
|--|--|--|-----------------------------|--------------------|--|---|--|--|--|--|--|
| Name of Financial Institution and Address (humber, Street, City, State and ZIP Code) Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (humber, Street, City, State and ZIP Code) No Yes, Fill in the details, Including disposal stess. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal stess. Name of Site Address, Rumber, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Site Address, Rumber, Street, City, State and ZIP Code) No Yes, Fill in the details. | sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | | |
| Address (Number, Street, City, State and ZIP Code) 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No | | Yes. Fill in the details. | | | | | | | | | |
| ash, or other valuables? No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. No Yes, Fill in the details. No Yes, Fill in the details. No Where is the property you borrowed from, are storing for, or hold in trust for someone. No Where is the property? Note of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or millar term. No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, C | | Address (Number, Street, City, State and ZIP | | | closed, sold, moved, or | Last balance before closing or transfer | | | | | |
| Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous cotoxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State | 21. | | | | | | | | | | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Address (Number, Street, City, State and ZIP Code) Date of notice Address (Number, Street, City, State and ZIP Code) Part 10: Environmental law, if you Address (Number, Street, City, State and ZIP Code) Part 30: Environmental law, if you Address (Number, Street, City, State and ZIP Code) Part 40: Environmental law, if you Address (Number, Street, City, State and ZIP Code) Part 40: Environmental law, if you Address (Number, Street, City, State and ZIP Code) Part 50: Environmental law, if you Address (Number, Street, City, State and ZIP Code) Part 50: P | | | | | | | | | | | |
| No Yes. Fill in the details. Name of Storage Facility Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name | | | Address (Number, | | Describe the contents | _ | | | | | |
| Yes. Fill in the details. Name of Storage Facility Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No State and ZIP Code) No Part 102 Give Details About Environmental Information Side makes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, wastes, or material. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. No | 22. | Have you stored property in a storage unit | t or place other than you | ır home within 1 y | ear before you filed for bankrup | ccy? | | | | | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 102: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice Address (Number, Street, City, State and ZIP Code) | | _ | | | | | | | | | |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No | | | to it? Address (Number, | | Describe the contents | | | | | | |
| Fart 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 10: Ves. Fill in the details. Address (Number, Street, City, State and ZIP Code) | Par | t 9: Identify Property You Hold or Control | ol for Someone Else | | | | | | | | |
| Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) | 23. | | omeone else owns? Inc | lude any property | you borrowed from, are storing | for, or hold in trust | | | | | |
| Address (Number, Street, City, State and ZIP Code) | | _ ''' | | | | | | | | | |
| For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. No | | | (Number, Street, City, | | Describe the property | Value | | | | | |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and Know it | Par | t 10: Give Details About Environmental In | formation | | | | | | | | |
| toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or use to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Date of notice know it | For | the purpose of Part 10, the following defini | tions apply: | | | | | | | | |
| to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Date of notice know it | | toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or | | | | | | | | | |
| hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Date of notice know it | | •• ,,,,,,, | | | | | | | | | |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) British Address (Number, Street, City, State and ZIP Code) Date of notice know it | | | | | | | | | | | |
| ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and know it Environmental law, if you know it | Rep | ort all notices, releases, and proceedings t | hat you know about, reg | ardless of when t | hey occurred. | | | | | | |
| ☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and know it Environmental law, if you know it | 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | | | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it | | _ | | | | | | | | | |
| | | | Address (Number, | | The state of the s | Date of notice | | | | | |

Case 19-32152-ABA Doc 10 Filed 12/12/19 Entered 12/12/19 11:09:41 Desc Main Page 36 of 48 Document Anthony J Bersito 19-32152 Debtor 2 Case number (if known) Josephine A. Bersito 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it **ZIP Code)** 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anthony J Bersito /s/ Josephine A. Bersito **Anthony J Bersito** Josephine A. Bersito Signature of Debtor 1 Signature of Debtor 2 Date December 12, 2019 **Date** December 12, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

No
 Yes
 Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
 ■ No
 □ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
 Official Form 107
 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Anthony J Bersito

Debtor 2 Josephine A. Bersito

Case number (if known) 19-32152

| Fill in this inforr | Fill in this information to identify your case: | | | | |
|---------------------------------|--|--|--|--|--|
| Debtor 1 | Anthony J Bersito | | | | |
| Debtor 2 (Spouse, if filing) | Josephine A. Bersito | | | | |
| United States E | Bankruptcy Court for the: District of New Jersey | | | | |
| Case number (if known) | 19-32152 | | | | |

| Check as directed in lines 17 and 21: | | | | | | | |
|---------------------------------------|---|--|--|--|--|--|--|
| 1 | According to the calculations required by this Statement: | | | | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 3. The commitment period is 3 years. | | | | | | |
| | ☐ 4. The commitment period is 5 years. | | | | | | |
| | Check if this is an amended filing | | | | | | |

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | Column 1 | - | Column Debtor non-fili | |
|--|---|-----------------------------|----------------------------------|----------|------|------------------------------|------|
| Your gross wages, salary, tips, bor payroll deductions). | uses, overtime, and | d commissi | ons (before all | \$ | 0.00 | \$ | 0.00 |
| Alimony and maintenance payment Column B is filled in. | s. Do not include pa | yments from | a spouse if | \$ | 0.00 | \$ | 0.00 |
| All amounts from any source which of you or your dependents, including from an unmarried partner, members and roommates. Do not include paym you listed on line 3. | g child support. In of your household, y | clude regula our depende | r contributions nts, parents, | \$ | 0.00 | \$ | 0.00 |
| Net income from operating a busing profession, or farm | ess, | btor 1 | | | | | |
| Gross receipts (before all deductions) | | \$ 0.00 | | | | | |
| Ordinary and necessary operating exp | enses - | \$ 0.00 | | | | | |
| Net monthly income from a business, | orofession, or fa <u>rm</u> \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 |
| 6. Net income from rental and other re | al property Del | btor 1 | | | | | |
| Gross receipts (before all deductions) | | \$ 0.00 | | | | | |
| Ordinary and necessary operating exp | enses - | \$ 0.00 | | | | | |
| Net monthly income from rental or oth | er real property | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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| btor 2 | Josephine A. Bersito | | | Case number (| if known | 19-32152 | | |
|---|---|--|--|-------------------|----------|---------------------|------------|------------|
| | | | | Column A Debtor 1 | | Column B Debtor 2 o | | |
| In | terest, dividends, and royalties | | | \$ | 0.00 | \$ | 0.00 | |
| Ur | nemployment compensation | | | \$ | 0.00 | \$ | 0.00 | |
| the | o not enter the amount if you contend e Social Security Act. Instead, list it he | ere: | nefit under | | | | | |
| | For you | \$ | 0.00 | | | | | |
| | For your spouse | \$ | 0.00 | | | | | |
| be no Ur dis pa do | ension or retirement income. Do no enefit under the Social Security Act. A st include any compensation, pension nited States Government in connection sability, or death of a member of the usy paid under chapter 61 of title 10, the session exceed the amount of retired pretired under any provision of title 10 of title | lso, except as stated in the next sen, pay, annuity, or allowance paid by in with a disability, combat-related in uniformed services. If you received a en include that pay only to the exterpay to which you would otherwise be | ntence, do the njury or any retired nt that it | \$ | 0.00 | \$ | 829.55 | |
| . In c Do red do Ur dis | come from all other sources not list of not include any benefits received undereved as a victim of a war crime, a comestic terrorism; or compensation, pointed States Government in connection sability, or death of a member of the cources on a separate page and put the | sted above. Specify the source and der the Social Security Act; paymer rime against humanity, or internation ension, pay, annuity, or allowance pon with a disability, combat-related in uniformed services. If necessary, list | nts nal or paid by the njury or | | | | | |
| | | | | \$ | 0.00 | \$ | 0.00 | |
| | | | | \$ | 0.00 | - | 0.00 | |
| | Total amounts from separate p | pages, if any, | + | \$ | 0.00 | - | 0.00 | |
| | | | - | | | | 7 | |
| | alculate your total average monthly ich column. Then add the total for Col | | r \$ | 0.00 | + \$ | 829.55 | = \$ | 829.55 |
| | | | | | | | | al average |
| 2: | Determine How to Measure Yo | ur Deductions from Income | | | | | | , |
| ^- | | | | | | | Φ. | 200 55 |
| | opy your total average monthly inco alculate the marital adjustment. Che | | | | | | \$ | 829.55 |
| П | You are not married. Fill in 0 below | | | | | | | |
| _ | | | | | | | | |
| _ | You are married and your spouse | | | | | | | |
| | Fill in the amount of the income lis dependents, such as payment of the | is not filing with you. ted in line 11, Column B, that was N he spouse's tax liability or the spous ling this income and the amount of i | se's suppo | rt of someone | other t | than you or you | ır depende | ents. |
| | If this adjustment does not apply, e | enter 0 below. | | | | | | |
| | | | \$ | | _ | | | |
| | | | \$ | | _ | | | |
| | | | +\$ | | _ | | | |
| | Total | | \$ | 0.00 | | Copy here=> | | 0.0 |
| | i Otal | | Ψ — | 2.30 | | opy lieic-/ | | |
| Υ | our current monthly income. Subt | ract line 13 from line 12. | | | | | \$ | 829.55 |
| c | Calculate your current monthly inco | ome for the year. Follow these ster | ps: | | | | | |
| | 5a Copy line 14 here=> | · | | | | | \$ | 829.55 |

Anthony J Bersito

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| Debtor 1 Debtor 2 | Anthony J Bersito Josephine A. Bersito | Case number (if known) | 19-32152 | | | |
|----------------------|---|------------------------|----------|----------|----------|---|
| | Multiply line 15a by 12 (the number of months in a year). | | | X | 12 | 1 |
| 15 | b. The result is your current monthly income for the year for this pa | rt of the form | | \$ | 9,954.60 | |

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| Debto | or 1 or 2 | Josephine A. Bersito | | Case number (if known) | 19-32152 |
|-------|--------------|---|----------------------------|--|-------------------------------------|
| 16. | Calc | culate the median family income that applies to | you. Follow these step | s: | |
| | 16a. | Fill in the state in which you live. | NJ | | |
| | 4.Ch | Fill in the graph of a code in complete | | | |
| | | Fill in the number of people in your household. | 2 | | s 82,249.00 |
| | 100. | Fill in the median family income for your state and To find a list of applicable median income amount instructions for this form. This list may also be ava | ts, go online using the li | | \$\$ |
| 17. | How | v do the lines compare? | | | |
| | 17a. | Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do | | | |
| | 17b. | Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14. | culation of Your Dispo | | |
| Part | 3: | Calculate Your Commitment Period Under 11 | U.S.C. § 1325(b)(4) | | |
| 18. | Сор | y your total average monthly income from line | 11 | | \$ 829.55 |
| 19. | cont | uct the marital adjustment if it applies. If you are tend that calculating the commitment period under use's income, copy the amount from line 13. | | | our |
| | | . If the marital adjustment does not apply, fill in 0 or | n line 19a. | | -\$0.00 |
| | | Subtract line 19a from line 18. | | | \$829.55 |
| 20. | | culate your current monthly income for the year | r. Follow these steps: | | e 829.55 |
| | 20a. | . Copy line 19b | | | \$\$ |
| | | Multiply by 12 (the number of months in a year). | | | x 12 |
| | 20b. | . The result is your current monthly income for the | year for this part of the | form | \$9,954.60_ |
| | 20c. | Copy the median family income for your state and | d size of household from | n line 16c | \$82,249.00 |
| | 21. | How do the lines compare? | | | |
| | | ■ Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4. | ise ordered by the cour | t, on the top of page 1 of this f | orm, check box 3, The commitment |
| | | Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4. | nless otherwise ordered | d by the court, on the top of pa | ge 1 of this form, check box 4, The |
| Part | 4: | Sign Below | | | |
| | By s | igning here, under penalty of perjury I declare that | the information on this | statement and in any attachme | ents is true and correct. |
| X | | Anthony J Bersito | | s/ Josephine A. Bersito | |
| | | nthony J Bersito gnature of Debtor 1 | | osephine A. Bersito signature of Debtor 2 | |
| | · | December 12, 2019 | | pate December 12, 2019 | |
| | lf v.c | MM / DD / YYYY | . | MM/DD/YYYY | |
| | н уо | u checked 17a, do NOT fill out or file Form 122C-2 | | | nonthly income from line 14 above. |

Anthony J Bersito

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Page 46 of 48 Document UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Georgette Miller, Esa. 335 Evesham Avenue Lawnside, NJ 08045 856-323-1100 info@georgettemillerlaw.com In Re: 19-32152 Case No.: **Anthony J Bersito** Josephine A. Bersito 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for 1. the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 4,750.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: • adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 1,690.00 The balance due is: \$ 3,060.00 The balance \blacksquare will \square will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ ____. The hourly fee charged by other members of my firm that may provide services to this client range from \$ to \$. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: 2. The source of the funds paid to me was: ■ Debtor(s) ☐ Other (specify below)

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| 3. | If a balance is due, the source of | f future compensation to be paid to me is: |
|-------|------------------------------------|---|
| | ■ Debtor(s) | ☐ Other (specify below) |
| | f I have agreed to share compensa | to share compensation with another person(s) unless they are members of my law ation with a person(s) who is not a member of my law firm, a copy of that any in the compensation is attached. |
| Date: | December 12, 2019 | /s/ Georgette Miller, Esq. Georgette Miller, Esq. |

Debtor's Attorney

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United States Bankruptcy CourtDistrict of New Jersey

| In re | Anthony J Bersito Josephine A. Bersito | | Case No. | 19-32152 |
|-------|---|-----------|-----------|----------|
| | · | Debtor(s) | — Chapter | 13 |
| | | | | |

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

| Date: | December 12, 2019 | /s/ Anthony J Bersito | |
|-------|-------------------|--------------------------|--|
| | | Anthony J Bersito | |
| | | Signature of Debtor | |
| Date: | December 12, 2019 | /s/ Josephine A. Bersito | |
| | | Josephine A. Bersito | |
| | | Signature of Debtor | |